

IN THE MATTER OF THE CONDITION OF

**Statement of
Emergency Detention by
Law Enforcement Officer**

Name of Subject _____

Date of Birth _____

Case No. _____

Agency No. _____

- **File this statement with the detention facility and court immediately. A probable cause hearing must be held within 72 hours of detention. (In Milwaukee County file this statement with detention facility only.)**
- **Please print or type all information below. All blanks must be filled in.**

I am a law enforcement officer and have cause to believe:

- The subject is mentally ill, drug dependent, or developmentally disabled.
- The subject evidences behavior which constitutes a substantial probability of physical harm to self or to others, as set forth in §51.15(2), Wisconsin Statutes.

My belief is based on specific and recent dangerous acts, attempts, threats or omissions by the subject as observed by me or reliably reported to me as stated below:

Dangerous Behavior:**When:** _____**Where:** _____**Describe Behavior:** _____

☐ **See attached page**

Witnesses to the dangerous behavior: (including officers who observed behavior)

Name of Witness	Telephone	Mailing Address	Relationship

(Name) _____ of the _____ County department of community programs (§51.42(3) Board) approves the need for this detention.

The subject was detained at (Name of §51.15(2) Facility) _____, on (Date) _____, at (Time) _____ ☐ am. ☐ pm.

Subject's Street Address	City	County	State
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DISTRIBUTION:

1. Court – Original
2. §51.15(2) Detention Facility
3. Subject with Notice of Rights

Signature of Officer	Department
Name Printed or Typed	Telephone